

## Challenge Grant II Program Evaluation Survey

This survey will become part of your county's Challenge II contract with the Board of Corrections. For purposes of this survey:

- “Program” refers to a defined set of interventions that will be given to a specified research sample in order to evaluate well-stated hypotheses.
- “Research Design” refers to the procedures you will use to test the stated hypotheses for your Program. In some instances you will have more than one Research Design for a Program, in which case a separate survey must be completed for each Research Design.
- “Project” refers to all the work that you propose to do with Challenge Grant II. For example, if you have two Programs and two Research Designs for each Program, the entire effort would constitute your Project (and you would complete four surveys).

To simplify the task of completing this survey, we refer you to several sources; 1) the initial Research Design Summary Form, 2) your Program’s responses to the technical compliance issues identified during the grant review, and 3) the Request for Additional Information form distributed at the Challenge II Evaluators Meeting on June 23, 1999. If no additional information was requested of a particular item on the Research Design Summary Form, enter the original text into the appropriate space below. If more information was requested, provide a more complete response. In either case, please provide the additional information requested by any follow-up question.

1.	County: San Bernardino	
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2. **Program Name:** Current Challenge Grant participants have found it useful to pick a name that helps them to create a Program identity (two examples are the “IDEA” Program and the “Home Run” Program). Indicate the title you will be using to refer to your Program.

Placement Readiness Evaluation Program (PREP)

3. **Treatment Interventions:** Describe the components of the Program that you will be evaluating. Another way of saying this is, “Describe how the ‘treatment’ juveniles (those in the Program) will be treated differently than the comparison juveniles (e.g., more intensive supervision, more thorough assessment, a wider range of services, more aggressive case management, better aftercare, etc.).”

1. Comprehensive multi-disciplinary assessment
2. Family outreach coordinate services
3. Aftercare program

3(a). The table below contains an exhaustive list of interventions that might be part of your Program. Use the appropriate number to distinguish the recipients, if any, of each of these interventions. If a particular intervention will not be part of your Program, please write a "0" in the box.

"1" - Treatment group only

"2" - Both groups with differences in specific intervention

"3" = Both groups with no differences in specific intervention

"4" = Comparison Group Only

1	Multi-disciplinary assessment to identify needs/plan interventions	0	Single point of entry/one-stop service center
0	Day Reporting Center	1	Multidisciplinary case management
0	Community Resource/Service Center	0	Restorative Justice Program
0	Neighborhood based prevention activities	0	Victim mediation/restoration
0	Teen Court	2	Institutional commitment
0	Neighborhood Accountability Boards	0	Transitional care
0	Victim advocacy	0	Voice tracking
0	On-site school	0	Community-oriented problem solving
0	Homework assistance	0	Reconciliation
0	Language proficiency development	0	Rigorous academic program
0	Monitor truancy through contact with schools	0	Tutoring
0	Probation officers on site: Prevention	0	ESL instruction
1	Probation officers on site: Intervention	0	Educational incentives
0	Social skills development	0	Mentoring
0	Life skills counseling	0	Life skills training
0	Youth leadership development	0	Swift and certain response
0	Parenting training - for youth	0	Emancipation skills training
0	Mental health counseling	0	Parenting training - for parents of youth
0	Family counseling	0	Sexual abuse counseling
0	Family counseling with involvement of extended family	0	Parenting counseling
1	Family conferencing	0	Parental prosecution
0	Family re-unification	0	Create multi-family support groups
0	Respite care	0	CPS referral
0	Family mentors	0	Medical services
0	Peer counseling	0	Physical therapy
0	Health education	0	Conflict resolution services
0	Conflict resolution training	0	Financial support
0	Anger management	0	Residential care
0	Finance management training	0	Clothing
0	Housing and food	0	Use of probation volunteers
1	Expedited case assignment and management	0	Vocational counseling
0	Community based restorative justice	0	Employment
0	Vocational training	0	Community service - paid
0	Job placement	0	Community service - unpaid
0	Pay restitution	0	Transportation
1	Intensive probation supervision	0	Behavioral contract
0	Probation supervision, not intensive	0	Speech therapy

0	Recreation activities	0	Outreach workers
0	After school programs		Other (Specify):
0	Crisis intervention		Other (Specify):
0	Electronic monitoring		Other (Specify):
0	Alcohol abuse counseling and support		Other (Specify):
0	Substance abuse counseling and support		Other (Specify):
1	Increase PO contact with other community agencies serving the family/youth (e.g., schools, mental health)		Other (Specify):

4. **Research Design:** Describe the Research Design that you will be using. Issues to be addressed here include the name of the design (e.g., true experimental design), the use of random assignment, and any special features that you will include in the design (e.g., the type of comparison group you will use for quasi-experimental designs).

### True Experimental Design

- 4a. Check (✓) the statement below that best describes your Research Design. If you find that you need to check more than one statement (e.g., True experimental and Quasi-experimental), you are using more than one Research Design and will need to complete a separate copy of the survey for the other design(s). Also, check the statements that describe the comparisons you will be making as part of your Research Design.

Research Design (Check One)	
<input checked="" type="checkbox"/>	True experimental with random assignment to treatment and comparison groups
<input type="checkbox"/>	Quasi-experimental with matched contemporaneous groups (treatment and comparison)
<input type="checkbox"/>	Quasi-experimental with matched historical group
<input type="checkbox"/>	Other (Specify)
Comparisons (Check all that apply)	
<input type="checkbox"/>	Post-Program, Single Assessment
<input type="checkbox"/>	Post-Program, Repeated Assessments (e.g., 6 and 12 months after program separation)
<input type="checkbox"/>	Pre-Post Assessment with Single Post-Program Assessment
<input checked="" type="checkbox"/>	Pre-Post Assessment with Repeated Post-Program Assessments (e.g., 6 and 12 months after program separation)
<input type="checkbox"/>	Other (Specify)

- 4b. If you are using a historical comparison group, describe how you will control for period and cohort effects.

NA

5. **Cost/Benefit Analysis:** Indicate by checking “yes” or “no” whether or not you will be conducting a Program cost/benefit analysis that includes at least: a) the cost per juvenile of providing the interventions to the treatment and comparison groups; b) the cost savings to your county represented by the effectiveness of the treatment interventions; and, c) your assessment of the program’s future (e.g., it will continue as is, be changed significantly, be dropped) given the results of the cost/benefit analysis.

Cost/Benefit Analysis	
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

- 5a. If you will perform a cost/benefit analysis, describe how that analysis will be performed.

The cost benefit analysis will assess the costs of PREP against any potential savings in the outcomes. Costs include the expenses involved in creating and staffing the PREP unit, the costs of educational services, after-care and outreach programs, the costs of additional services provided for families and subjects in the experimental group in placement, and the costs of additional psychological evaluations and assessments. Data on savings incurred from reduced recidivism will be developed with San Bernardino County officials as part of the project. Potential savings to be considered include reduced days in custody prior to placement, reduced days in placement, savings from reductions in failed placements, and reduced costs from less recidivism.

6. **Target Population:** This refers to the criteria that treatment and comparison subjects must meet in order to be able to participate in the research. Target criteria might include age, gender, risk level, legal history, wardship status, geographical area of residence, etc.

Please provide a detailed description of the criteria you will be using and how you will measure those criteria to determine eligibility (e.g., school failure as measured by suspensions/expulsions or by low grade point average)

Participants in both control and treatment groups will be “difficult-to-place” adjudicated court wards in juvenile hall awaiting placement.

- 6a. Describe any standardized instruments or procedures that will be used to determine eligibility for Program participation, and the eligibility criteria associated with each (e.g., “high risk” as measured by the XYZ risk assessment instrument, a score of “X” on the CASI, etc.).

A minor will be determined to be “difficult-to-place” by the supervising probation officer if he or she exhibits one or more of the following characteristics, symptoms, and/or conditions:

Borderline IQ or retardation	Extreme assaultiveness
History of fire-setting	Persistent history of AWOL from placement
History of cruelty to animals	Sexual predation/victimization
Suicidal ideation/history	Psychosis/delusionality
History of devil worship/satanism	Extreme oppositional disorder

7. **Sample Size:** This refers to the number of juveniles who will participate in the treatment and comparison samples during the entire course of the research. Of course, in any applied research program, subjects drop out for various reasons (e.g., moving out of the county, failure to complete the program, etc). In addition, there will probably be juveniles who participate in the Program you will be researching and not be part of the research sample (e.g., they may not meet one or more of the criteria for participation in the research, or they may enter into the Program too late for you to conduct the mandatory minimum of six months follow up of the juvenile after Program completion). **Using the table below**, indicate the number of juveniles who will complete the treatment interventions or comparison group interventions, plus the minimum six months follow up period. This also will be the number of subjects that you will be including in your statistical hypothesis testing to evaluate the Program outcomes. Provide a breakdown of the sample sizes for each of the three Program years, as well as the total Program. Under **Unit of Analysis**, check the box that best describes the unit of analysis you will be using in your design.

Sample Sizes (Write the expected number in each group)			
Program Year		Treatment Group	Comparison Group
First Year		108	108
Second Year		99	99
Third Year			
Total		207	207

  

Unit of Analysis ( Check one)			
x	Individual Youth		Family
	School		Geographic Area (e.g., neighborhood)
	Other		Other:

8. **Key Dates:**

- “Program Operational” is the date that the first treatment subject will start in the Program.
- “Final Treatment Completion” is the date when the last treatment subject in the research sample will finish the interventions that constitute the Program (and before the start of the follow up period).
- “Final Follow Up Data” is the date when the last follow-up data will be gathered on a research subject (e.g., six months after the last subject completes the treatment interventions or whenever these data will become available).

Program Operational Date: 10/01/99  
Final Treatment Completion Date: 02/31/02  
Final Data Gathering Date: 08/30/02

9. **Matching Criteria:** Whether or not you are using a true experimental design, please indicate the variables that you will be tracking to assess comparability between the groups. Matching criteria might include: age, gender, ethnicity, socioeconomic status, criminal history, parental criminal history, etc.

The primary matching criteria will consist of a minor being determined to be “difficult-to-place.” We will track and compare the distribution of these criteria among the treatment and control groups in order to ensure comparability between the groups. For instance, we will document the number of “difficult-to-place” criteria experienced or identified by each child involved in treatment and control groups and compare the distribution of criteria across groups. We will also assess which criteria are more prevalent among both groups and which characteristics of “difficult-to-place” children or minors appear most crucial in their case processing. Efforts will also be made to document the processes by which these criteria are identified and made salient in terms of probation outcomes. In addition, at a minimum we will track and compare the distribution of key variables – age, gender, race/ethnicity, educational level, prior offenses, prior placements and family background – among the treatment and control group members.

9a. After each characteristic listed above, describe how it will be measured.

Please refer to item # 6a. for a list of criteria used to determine if a minor is “difficult-to-place.” In general, we will document the presence or absence of each one of these criteria and the combined number of criteria present for each youth. The remaining key variables listed in item # 9 will be coded similarly to the variable definitions set forth for “common data elements.” For example, age will be recorded as date-of-birth and gender will be coded as male or female. Ethnicity will be coded according to State DOJ guidelines. Educational level will be measured by whether or not the minor is performing at or above chronological grade-level and whether or not he/she was suspended or expelled in the previous year. Family background, at a minimum, will be measured by recording which family member last had primary care of the minor, the number of siblings known to the minor, and the number of changes in residence (excluding placements) within the previous year. Prior offenses will be measured by common data elements or variables # 15 - 20 and # 23 - 30. These variables will document information concerning prior sustained petitions, prior periods of informal probation and prior out-of-home placements.

- 9b. Which of these characteristics, if unequally distributed between the treatment and comparison groups, would complicate or confound the tests of your hypotheses? How will you manage that problem?

Because the design is a true experiment the expectation is that determining criteria will be equally distributed among treatment and comparison groups. Analyses will be undertaken to statistically confirm this expectation and also to compare the treatment and control groups in terms of key characteristics, such as age, ethnicity and family background, listed in item # 9.

- 9c. If you are using an historical comparison group, describe how you will ensure comparability (in terms of target population and matching characteristics) between the groups.

NA

10. **Comparison Group:** The intent here is to document the kind of comparison group you will using. If you are using a true experimental design, the comparison group will be randomly selected from the same subject pool as the treatment subjects - in that case enter "true experimental design" in the space below. However, for quasi-experimental designs, the comparison group might come from a number of different sources such as: matched schools, matched geographical areas, other matched counties, a matched historical group, etc.

Please identify the source of your comparison group.

True experimental design

11. **Assessment Process:** The intent here is to summarize the assessment process that will determine the nature of the interventions that the juveniles in the treatment group will receive. For example, psychological testing, multi-agency and/or multi-disciplinary assessments, etc.

A unique component of PREP is the administration of multi-agency, multi-disciplinary assessments for minors assigned to the treatment group. This process will include measures to assess educational, psychological and developmental status of the minor, drug/alcohol use history, criminal/victimization history, sexual/physical abuse history, and self destructive and/or antisocial behavior and attitudes of the minor.

- 11a. Describe any standardized assessment instruments that will be administered to all treatment group subjects for the purposes of identifying appropriate interventions.

These measures are currently being developed by the multi-agency, multi-disciplinary PREP unit team staff, working in collaboration with the research evaluation team at the Presley Center. Some of these assessments will consist of collecting official data on the involved minors such as school performance records, criminal offense history, etc...

- 11b. Identify, which assessment instruments, if any, will also be administered to comparison group subjects.

At a minimum, the comparison group subjects will receive a psychological evaluation by the Probation department or contract clinical staff. Official data on educational history and criminal/victimization history will also be collected.

12. **Treatment Group Eligibility:** Indicate the process by which juveniles will be selected into the pool from which treatment subjects will be chosen. This process might include referral by a judge, referral by a school official, referral by a law enforcement officer, administration of a risk assessment instrument, etc.

The population from which both treatment and comparison groups will be selected consists of "difficult-to-

place” adjudicated wards awaiting placement. The determination that a ward is “difficult-to-place” will be made by the supervising probation officer using the noted criteria.

13. **Comparison Group Eligibility:** Indicate the process by which juveniles will be selected into the pool from which comparison subjects will be chosen. For true experimental designs, this process will be the same as for treatment subjects.

Same as process for treatment group.

- 13a. If procedures for determining the eligibility of participants for the Comparison Group differ from those described in 12, please describe them. If different procedures are used, how will you ensure comparability of the two groups on critical characteristics?

Variable	Score/Scale	Additional Information	Significance Test
Days awaiting placement	Number of days		ANOVA, ANCOVA & Failure analysis
Days in placement	Number of days		ANOVA, ANCOVA & Failure analysis
Placement failures	Number of failures		ANOVA, ANCOVA & Failure analysis
Recidivism	Re-arrests	Severity, time until re-arrest and number	ANOVA, ANCOVA & Failure analysis
Drug/Alcohol Abuse	Presence	Severity and frequency	ANOVA, ANCOVA & Failure analysis

14. **Outcome Variables:** In the table above, list some of the most important outcome variables that you are hypothesizing will be positively affected by your Program. Possibilities include grade point average, truancy, arrest rate, successful completion of probation, petitions sustained, alcohol and drug problems, risk classification, etc.
15. **Score/Scale:** To “measure” the effects produced by your Program, you must put the variable in question on some sort of measuring scale (e.g., a test score, a count of occurrences, a rating scale, a change score indicating education achievement progress). For each variable for which you are making a hypothesis, indicate in the table above the measurement that you will be statistically analyzing when you test your hypothesis.
16. **Additional Information:** To explain more fully how you intend to test your hypothesis, you might find it helpful to supply additional information. For example, you might intend to partition the data by gender or make differential hypotheses for different age ranges. Supplying “additional information” is optional; but if there is some aspect of the hypotheses testing that is important for us to know about, please supply it in this section in the table above.
- 16a. For each outcome variable that will not be measured by a standardized assessment procedure, describe the procedures that will be used. For instance, if your county has developed a risk-assessment tool that you will be using to measure change, please describe how it works.
17. **Significance Test:** In order for a statistical procedure to be the appropriate test of a particular hypothesis, certain assumptions must be met. It is critical at the outset of a research design to make sure that the measuring devices, measuring scales, samples, and methodology produce the kind of data that fit the requirements of the intended statistical procedure. In this section in the table above, please list your choice for the testing of your hypothesis, given the research design you have chosen, the measurement you will use, and the data you will be collecting.

- 14a. The table below contains an exhaustive list of the outcomes for which hypotheses have been developed by different Challenge II Programs. In the column to the left, check (✓) those outcomes that will be evaluated as part of your research design. For each such item, check the boxes to the right if you will also be collecting data for this variable for the period preceding program entry (Pre-Program) and/or for the period during program participation (During Program).

✓ Here if Applicable	Outcome	✓ Here if Data Will Also be Collected for Conduct/Status Prior to or During Program	
		Pre-Program	During Program
	Risk Factors		
	Time to Complete Risk Assessment		
X	Arrest/Referral (any)	X	X
X	# of Arrests/Referrals	X	X
X	Type(s) of Arrest(s)/Referral(s)	X	X
X	Petitions Filed (any)	X	X
X	Sustained Petitions (any)	X	X
X	# of Sustained Petitions	X	X
X	Type(s) of Sustained Petition(s)	X	X
X	Adult Convictions (any)		X
X	# of Adult Convictions		X
X	Type(s) of Adult Convictions		X
	Institutional Commitment (any)		
	# of Institutional Commitments		
X	Commitment Time		X
X	Completion of Institutional Commitment		
	Restitution Ordered		
	Restitution Amount		
	Restitution Paid		
	Amount of Restitution Paid		
	Court-Ordered Work		
	Court-Ordered Work Hours		
	Court-Ordered Work Completed		
	# of Court-Ordered Work Hours Completed		
	Court-Ordered Community Service		
	Court-Ordered Community Service Hours		
	Court-Ordered Community Service Completed		
	# of Court-Ordered Community Service Hours Completed		
X	Education-Enrollment Status	X	
X	Education-Grade Level	X	
	Education-Credits Earned		
	Education-Grade Point Average		
X	Education-Expulsions	X	
X	Education-Suspensions	X	
	Gang Involvement		
X	Alcohol Use	X	X
X	Drug Use	X	X
X	Runaway	X	X
X	Wardship Status	X	X
	Informal Probation Status		
	Contacts with Probation Officer		
X	Family Functioning	X	
X	Self Esteem	X	
X	Use of Community Services		

✓ Here if Applicable	Outcome	✓ Here if Data Will Also be Collected for Conduct/Status Prior to or During Program	
		Pre-Program	During Program
X	Self-Protective/Avoidance Behavior	X	
X	Client Satisfaction		
X	Family Attitudes		X
	Social Skills		
	Pregnancy/Child Birth Rate		
	Perceived Control Over Life		
	Community Attachment – Sense of Membership		
	Time to Initiate Supervision		
X	Referrals to Community Agencies		X
	Other (Specify):		
	Other (Specify):		
	Other (Specify):		
	Other (Specify):		
	Other (Specify):		

The following questions are supplemental to the Research Design Summary Form and will help us understand how you intend to manage data collected for this project.

18. What additional background information (if any) will be collected for the participants (both treatment and comparison)? For instance, will you gather information about family criminal background, drug involvement, parent attitudes, etc. If so, what will be collected and how?

Demographic background information that can be obtained from the official records of wards awaiting placement (in both control and treatment groups) will be collected. At a minimum, this information will include age, gender, race/ethnicity and date of birth.

19. How will the process evaluation be performed? What components will be addressed and how will they be measured (e.g., services available and frequency of use of those services by each participant)? What is the timeframe for gathering process-related information? What recording mechanisms will be used? If descriptive or statistical analyses will be performed, please describe what they will be.

The process evaluation of PREP will involve assessing the degree to which PREP is being implemented as designed and is meeting its intended objectives. Process evaluation will have two main components: it will involve assessing the operation of PREP from the vantage points of those involved in the program, including PREP team members (PREP unit staff and the family outreach team), placement staff, clients or minors, and their families. The process evaluation will also involve ongoing quantitative documentation of the frequency, duration, type and outcomes of services provided to the minor and their family members while in the PREP unit, and during placement and placement aftercare.

Specifically, interviews will be conducted with members of the PREP unit staff (DBH clinician, teacher and PO II and III) at 6-month intervals in order to identify the pre-placement needs of “difficult-to-place” youth and how well the PREP unit is meeting those needs. As one of the program strategies of PREP is to increase placement success by enhancing the assessment and stabilization of the minor before placement, interviews will be conducted with minors, both in the control and treatment groups, after placement in order to reveal how well the minor was prepared for placement. Interviews with key placement staff at regular intervals will also aid in determining the impact of enhanced assessments and other pre-placement services on the minor’s success while in placement. Finally, interviews with the family outreach team and involved family members will be undertaken at 6-month intervals in order to document the implementation and success of this unique aspect of PREP. Family outreach will be a key component of the program from the time the ward is admitted to the PREP unit through the completion of placement and aftercare. The goal of these interviews will be to provide information as to how well the family involvement component of PREP is working during and, especially, after placement. When and if minors experience failure, either during

placement or aftercare, interviews will be conducted with PREP and/or placement staff and minors and family members in order to ascertain the reasons for placement failure.

The more quantitative aspect of the process evaluation will involve developing and recording key measures that reflect the frequency, duration, type and outcomes of the services provided as part of PREP. At a minimum, the frequency, duration and type of contact between minors and PREP unit staff will be recorded during the 25 days awaiting placement. Likewise, we will be tracking the frequency, purpose and outcomes of contacts among the family outreach team and family members. The number of contacts and the services provided to family members by the family outreach team (before, during and after placement) will be recorded, as will the number and outcomes of referrals to outside service providers on the part of the family outreach team. The number and purpose of contacts between family members, minors and placement staff while the minor is in placement will be tracked. The type, frequency and duration of services provided to the minor while in placement will be noted and considered in relation to the overall treatment plan devised by the PREP unit staff. That is, we will assess the degree to which the services and treatment provided while in placement correspond to the needs identified by the enhanced assessments and evaluation undertaken during the minor's time in the PREP unit. The type of services provided and the level and scope of the minor's supervision during the aftercare phase of PREP (for example, items such as the number and outcome of drug tests and the number of contacts between the minor and the supervisory probation officer) will be noted. Finally, upon a minor's successful completion of placement and aftercare, the minor's family will be asked to briefly assess the impact of the family outreach team's involvement with them, and the wraparound services provided both for the minor and for the family unit as a whole. Family members who remain involved with the family outreach team throughout the minor's time in PREP will be administered a brief survey in combination with an exit interview.

In general, the goal of the process evaluation is to trace the implementation of PREP in as much detail as possible in order to identify and highlight both potential weaknesses and strengths of this unique placement model. This component of the research design will be of great importance in helping to determine the success of PREP in meeting its stated goals and objective. It will also be key in any future efforts to initiate placement programs based on the PREP model.

20. Describe how you will document services received by the treatment and comparison group members. Examples are: how many family counseling sessions did the family attend, how intense (and by what measure) was the drug treatment, did the subject complete the interventions, etc.?

As discussed above in the outline of the process evaluation, every effort will be made to document the frequency, duration, type, and outcome of all services provided to the minor and family members during their time in PREP. The precise measures to be used will be developed in the near future through collaboration with PREP staff members and the research evaluation team at the Presley Center.

21. What will be the criteria for completion of the program? For instance, will the Program run for a specified amount of time irrespective of participants' growth or lack thereof? If so, how long? Alternatively, will completion be determined by the participants' having achieved a particular outcome? If so, what will that outcome(s) be and how will it be measured? Examples are decreased risk as measured by a particular instrument, improved academic performance, etc.

The main criteria for finishing the program will be the successful completion of the court-ordered placement and the aftercare period. During the placement period, placement staff in conjunction with the supervisory probation officer will decide the limits of acceptable behavior. However, once a minor in placement has been determined to be AWOL for longer than 48 hours, automatic termination from the program will result. During the aftercare period of PREP, the supervisory probation officer will specify the conditions under which a minor will be terminated from the program on a case-by-case basis. A minor's violation of terms of probation during the aftercare period of PREP will not automatically eliminate the minor from the program.

22. If Program completion will be linked to probation terms, how will you record those terms and identify adequate completion? Examples include paying restitution, completing a work program, performing community service, etc.

Program completion entails the successful progression through the placement and aftercare periods. The terms of completion will be further specified by the supervising probation officers.

23. On what basis will a subject be terminated from the Program and be deemed to have failed to complete the Program?

As stated in item # 21, a youth's termination from PREP will be determined by the supervising probation officer. While a minor may be terminated from the program, and hence, the treatment group, all efforts will be made to document the outcomes listed in item # 14a for these youth as long as they remain under the jurisdiction and supervision of San Bernardino County Probation Department. In particular, we will document and compare terminated youth versus continuing PREP participants (treatment group members) and control group members in terms of future offending behavior, alcohol and drug use, and runaway status, subsequent placements or changes in wardship status. Likewise, while control group members cannot be considered "terminated" in the same sense, control youth who re-offend will be considered "drop-outs." As long as their cases remain open with San Bernardino County Probation Department we will attempt to track and record the same outcome variables as those listed above for consideration in the case of terminated treatment group members. The goal here, in collecting follow-up data for terminated program participants or control group re-offenders, is to allow for comparisons between those minors successfully completing placement and those minors, both treatment and control, who fail to complete the terms of their probation. These comparisons may help to determine factors that influence the success of PREP and may highlight key differences in minors who benefit from PREP versus those who do not experience placement success. This type of analysis will be especially useful in future program modification and development.